



US Youth Soccer
A Proud Member of US Soccer



Affiliated with the Federation International de Football Association

Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games CMSSL March Mania Website URL: www.elitetournaments.com

Hosting Organization SAC Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Jim Carlan Title Chief Operating Officer Phone (410) 203 W

Address 4560 Centennial Lane Email operations@sac-hc.org Phone () _____ H

City Ellicott City, MD 21042 State MD Zip Code 21042 Phone () _____ FAX

State Association or Affiliate MSYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Covenant Park **TEAM ENTRY DEADLINE:** February 26, 2007

Date(s) of Tournament or Games March 10-11, 2007 Estimated # of Teams 75

Tournament or Games Director or Contact Person Michael Libber Phone (410) 3440103 W

Address 17 Springtide Ct Email mllibber@elitetournaments.com Phone (410) 3440103 H

City Baltimore State MD Zip Code 21220 Phone () _____ FAX

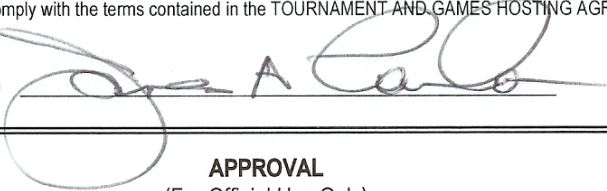
Age Groups Accepted				Type(s) of Team Accepted	B	G	Roster Size	# Guest Players Allowed	Length of Games	# Players on Field	Awards	Minimum # of Games	Entry Fee	Bond
U-	8	8/1/	98	S1,S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60 MIN	7	<input checked="" type="checkbox"/>	3	300	<input type="checkbox"/>
U-	9	8/1/	97	S1,S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60 MIN	7	<input checked="" type="checkbox"/>	3	300	<input type="checkbox"/>
U-	10	8/1/	96	S1,S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60 MIN	7	<input checked="" type="checkbox"/>	3	300	<input type="checkbox"/>
U-	11	8/1/	95	S1,S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60 MIN	8	<input checked="" type="checkbox"/>	3	300	<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

*List of types of teams and tournaments is on reverse side of this form.

- RT RESTRICTED TOURNAMENT** – US Youth Soccer Members and Affiliates only.
- Team will be restricted to teams within the national state association Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT** Other US Soccer Members as listed: ALL US Soccer Affiliates
- Foreign Teams as listed: _____

The Hosting Organization agrees to be bound by and comply with the terms contained in the TOURNAMENT AND GAMES HOSTING AGREEMENT and all applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization



Date 9/13/06

APPROVAL
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE

Maryland State Youth Soccer Date 15 Sept. 2006

By



Title

Executive Director

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.